PTO/SB/17 (10-08)

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| 1 | Complete if Known | | | | | | |
|---|-------------------|-----------------------------------|-----------------------------------|------------------------------|--------------------------|----------------|--------------|
| Effe Fees pursuant to the Conso | Application Nur | Application Number 10/799,617-Cor | | | | | |
| FEE TRANSMITTAL | | | Filing Date | М | March 15, 2004 | | |
| 4 | | | First Named In | ventor K | Koji Tsukimori | | |
| For FY 2009 | | | Examiner Name | F. | F. M. Zaman | | |
| Applicant claims s | Art Unit | Art Unit 2111 | | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 1,080.00 | | | Attorney Docket | Attorney Docket No. SON-2967 | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | |
| Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | |
| x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| FILING FEES SEARCH FEES EXAMINATION FEES | | | | | | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) Fee | Small Entity (\$) Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees P | aid (\$) |
| Utility | 330 | 165 540 | 270 | 220 | 110 | | |
| Design | 220 | 110 100 | 50 | 140 | 70 | | |
| Plant | 220 | 110 330 | 165 | 170 | 85 | | |
| Reissue | 330 | 165 540 | | 650 | 325 | | |
| Provisional | 220 | | 0 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEE | | | · · | | | | Small Entity |
| Fee Description | | | | | | | Fee (\$) |
| Each claim over 20 (including Reissues) | | | | | | | 26 |
| Each independent claim over 3 (including Reissues) | | | | | | | 110 |
| Multiple dependent claims 390 195 | | | | | | | |
| <u>Total Claims</u> | Extra Claims | Fee (\$) | Fee Paid (\$) | id (\$) Multiple De | | ndent Claims | |
| - or HP = HP = highest number of tota | XX | | | <u>Fee</u> | <u>(\$)</u> <u>F</u> | ee Paid (\$) | 1 |
| Indep. Claims | | | Fee Paid (\$) | | | | _ |
| | x | = | | | | | |
| HP = highest number of inde | | for, if greater than 3. | | | | | |
| 3. APPLICATION SIZE | FEE | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | |
| listings under 37 Cl | | | | | ity) for each ad | ditional 50 | |
| sheets or fraction th | | | | | F (A) | Fac 17 | and (th) |
| Total Sheets | Extra Sheets | | additional 50 or fra | | <u>Fee (\$)</u> | <u>ree r</u> | aid (\$) |
| - 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) | | | | | | | Paid (\$) |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1403 Request for oral hearing | | | | | | 1,080.00 | |
| SUBMITTED BY | | | | | | | |
| Signature | 12 1 | 40,290 | Registration No. (Attorney/Agent) | 40,290/ 47,255 | Telephone | (202) 955-3750 | |
| Name (Brint/Tune) Christ | rophor M. Tohin | Brian K Dutton | | , | Date | July 21 | 2000 |